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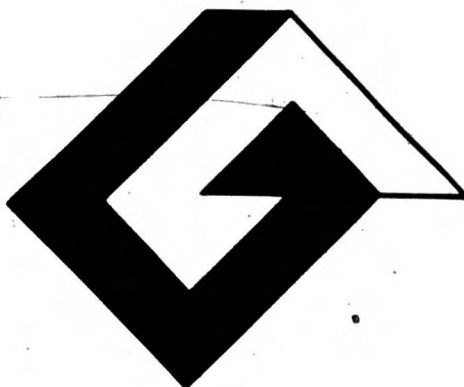
## ABSTRACT

This catalog lists for individuals, universities and colleges, and single state agency directors training grants supported by the National Institute on Drug Abuse. The four different types of grants described are developmental, career teacher, individual fellowship, and institutional research training grants. Each section is divided alphabetically by state. Because the training grants are a component of the National Manpower and Training System (NMTS), the first half of the directory is a description of NMTS in order to place the grants in their proper context. The NMTS description provides an historical perspective, including the system's development and structure, and its activities in the Manpower Training Branch, National Drug Abuse Center, Regional Support Centers, State Training Support Program, Career Development Centers, Health Professions Education Program, Developmental Training Grants Program, Research Fellows Training Grants Program, Federal Agency Manpower Training Group, and contracted services. (Author)

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# National Institute on Drug Abuse Training Grants Directory



U.S. DEPARTMENT OF HEALTH,  
EDUCATION & WELFARE  
NATIONAL INSTITUTE OF  
EDUCATION

APRIL 1979

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Rockville, Maryland 20857

U.S. DEPARTMENT OF HEALTH,  
EDUCATION, AND WELFARE  
Public Health Service  
Alcohol, Drug Abuse, and Mental Health Administration

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## Preface

The National Institute on Drug Abuse Training Grants Directory is published in response to requests from individuals, universities and colleges, and Directors of the Single State Agencies for a convenient catalogue of the training grants supported by the Institute.

The grants are described in four sections: Developmental, Career Teacher, Individual Fellowship and Institutional Research Training Grants. Each section is divided alphabetically by State. Since the training grants are a component of the National Manpower and Training System (NMTS), we have included a description of the NMTS in order to place the grants in their proper context.

We hope you will find the Directory useful.

Lonnie E. Mitchell, Ph.D.  
Chief  
Manpower and Training Branch  
Division of Resource Development

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## **The National Manpower and Training System**

The National Manpower and Training System (NMTS) is an integrated, collaborative response to the demand for training and technical assistance at Federal, State, and local levels. This section contains an historical analysis of the development of the NMTS, a definition of the system's current components, and a discussion of the missions, functions, and outputs of each component as it interacts to provide training and support to people and programs responsible for treatment delivery, prevention, evaluation, research, planning, and policy making. In addition, the new congressionally mandated focus on the analysis of manpower trends and the allocation of manpower are briefly described.

The ultimate goal of the NMTS is to provide training and manpower development activities that will lead to the delivery of quality drug abuse services across the country to citizens who need them. To achieve this objective, the NMTS provides training, training development, technical assistance, and credentialing functions. It represents the combined effort of many individuals and organizations, both public and private.

An overview of the system's operation is presented below. Needs assessments facilitate the identification of goals, and program plans are designed to achieve these goals. As programs are implemented and disseminated, their impact is evaluated. This impact may be reflected in subsequent needs assessments. This cycle--from planning, to feedback, to planning--enables the system to perpetually correct itself, redefine methodologies, hone techniques, and achieve specific outcomes with each cycle of planning.

The NMTS was developed, and is being maintained, by:

- Assessing and identifying needs (the mission of each component is derived from needs assessment);

- Establishing system components and linkages among them;

- Encouraging the use of linkages for interaction and support that enables components to meet manpower and training needs; and

- Formalizing the network of interaction when identification of new needs leads to system changes or adaptations.

The system is based on evolving ties among components, permitting them to interact, share with, and complement each other as they work toward mutual goals.

The NMTS attends both to manpower and to training issues. Manpower issues are related to the gathering of information on, and conducting research related to, manpower supply, utilization, and distribution of the present and future manpower needed in prevention, treatment, rehabilitation, and research. Training involves identifying functions in drug abuse intervention and prevention; identifying the skills, knowledge, and attitudes required to provide quality care; and then building a system to teach the skills, knowledge, and attitudes.

In sum, the NMTS is a mechanism for establishing various delivery elements and coordinating development, interchange, and delivery of training and manpower development, technology, and resources. It provides validated training for use by States, design of training models and strategies, development of criteria and assessment instruments that meet State certification requirements, evaluation of training, and information and resource exchange among all components.

### HISTORICAL PERSPECTIVE

To understand the importance of NMTS' operation as a system, it helps to understand its origin. With the increase in drug abuse in the 1960's, a new dimension was added to Federal policy and practice. To the traditional focus on law enforcement as a means for controlling the use of illegal drugs, the Government added a new emphasis on providing treatment and prevention services to drug-abusing populations. Only a few people in a few centers knew much about treating drug abuse; hardly anyone knew anything about preventing drug abuse. Hence, a new cadre of workers had to be trained to deliver services. Federal responsibility for this training and supportive research effort was given to the National Institute of Mental Health and to the Office of Economic Opportunity. Both agencies worked to identify successful intervention methods and to train people to work in drug abuse programs across the country.

The strong leadership role played by these agencies was a natural outgrowth of the recognition that a Federally-coordinated effort was needed to fill manpower needs in the newly emerging drug abuse field. Policies concerning training, and training content itself, were generated by Federal agencies; most of the Nation's training was done by Federal staff, contractors, or grantees.

Most human service professionals (psychiatrists, other physicians, psychologists, social workers, nurses, etc.) had not been trained in specific techniques to identify and treat the problems associated with drug abuse. Many of the people who had successfully conducted treatment efforts were ex-addicts, who lacked technical training but were able to help others through a variety of techniques including role modeling, group encounters, and strict residential supervision. The professionals, who lacked specific experience in treating drug abuse, and the paraprofessional ex-addicts, who lacked formal, recognized training, each had something to offer the other in the early Federally funded programs.

From the beginning, the relationship between the National Institute on Drug Abuse's (NIDA) Division of Resource Development (DRD) and the States

was collaborative, rather than one in which policy and training programs were initiated at the Federal level and mandated to the States. From the beginning, the leadership of DRD's Manpower and Training Branch (MTB) realized that truly effective programs would not result if local, State, and regional programs were simply on the receiving end, with little voice in determining the policies that affected them or in designing the training curricula made available to them.

## DEVELOPMENT AND STRUCTURE OF THE NMTS

Federal policymakers at the Special Action Office for Drug Abuse Prevention (SAODAP) and NIDA recognized that most training activities were being developed as a response to crisis rather than as the result of systematic study to determine what service methods worked best under various conditions. Training policies and content were being shaped reactively rather than proactively because of the intense pressure on the Federal Government to locate and train service providers as fast as possible to deal with the growing drug epidemic. The need for immediate response did not permit the systematic approach to training program development that has since been developed.

In the months after NIDA was created, the need for a systems approach to training became clear. Such an approach would avoid duplication of effort, clearly define the responsibilities of many constituencies, and lead to collaboration among the many levels and types of personnel to provide appropriate training services and research efficiently and cost-effectively. Therefore, the established goal was to create a national training system in which the Federal Government would play research, development, and coordination roles. The States would have the growing responsibility for building training delivery capacity and for developing new manpower resources and training personnel to deliver high quality services. But many other groups would have to carry out other roles related to achieving goals such as credentialing allied health professionals or getting drug abuse-related curricula established in medical schools.

One of the major values of establishing a systems approach to the delivery of manpower and training services is the cost-effectiveness that is inherent in a systematized approach, resulting primarily from the reduction in duplication of effort. But adopting the systems approach to development also enabled MTB to focus emphasis on several underlying themes that had existed since the Federal effort to provide training began. One of these themes is the emphasis on two types of training--generic training common to all who work in the field, and specialty training for various groups of general health professionals outside the categorical drug abuse network.

Another recurrent theme that is expressed in nearly every component of the system is the emphasis on designing training that is focused specifically on the cultural, ethnic, academic, rural, urban, and minority-group needs of the drug abuse intervention system. For instance, many drug abusers are members of minority groups, and treatment providers should understand the special needs of these groups. Similarly, minority group members are underrepresented among treatment staff and program administration and there

is a need to help people from these groups receive the training needed to move into leadership roles. Much emphasis has been placed, from the beginning, on developing programs for training allied health professionals and getting these programs introduced into colleges and universities, often with credit provided for life experience and work experience. A variety of program models, including external-degree programs, has been developed by the NMTS so that allied health professionals--many of them from minority groups and a high percentage of them former addicts--can acquire the credentials needed to move up in the drug abuse service network or to move laterally into other human service fields.

Many times when systems are developed, even though their stated goal is to meet human need, the human beings who are served by the system are overlooked. Consequently, one of the emphases that permeates all NMTS components is the need to maintain contact with the clients of drug abuse programs, as well as with the personnel who work in them, to ensure that the training programs conducted are responsive to actual needs. Although a formal system structure has been developed for NMTS, the needs of the people within the system and the clients who receive services from them have not been overlooked. Rather, they are viewed as system components, with program clients serving as the source of initial needs assessment, as well as the ultimate recipients of services provided by people trained through the system's efforts.

In 1973, the MTB began to develop a clearly-stated plan for developing a system in which people at Federal, regional, State, and local levels in the drug abuse intervention network, and their counterparts in research and academic centers, could work collaboratively. It was decided that the ultimate product, or output, of the system should be not just the provision of training, but the provision of training that would enable workers in the field to deliver the highest possible quality of services.

The need for a system with diverse components, working together and feeding data into each other, became clear during a time when Federal agencies were decentralizing their activities primarily to comply with legislative mandates. NIDA's MTB complied with the mandate for decentralization, of course, but its overriding objective in the process of dividing up responsibilities throughout the Nation was to create a system in which the components were equal partners, in and contributors to, the development of training that would ensure the delivery of appropriate treatment and prevention services throughout the land.

The MTB operated from the principle that the most effective policy is that which is developed in collaboration with those who are most affected by it. For that reason, systems development was viewed as a collaborative effort among all system components, a process in which representatives of all components worked as peers in the development of the system. In this process, ideas, decisions, and problem-solving would emanate from all of the system's components. In effect, what emerged by 1974 was a system that had no "top" or "bottom." Rather, it was composed of components with clearly defined responsibilities that worked together to provide the products and outputs essential to preparing workers to meet the needs of



people in treatment or to carry out prevention activities.

By 1974, the Federal effort to coordinate training throughout the Nation was no longer conducted "on the defensive." The "trial-and-error" phase was over, and there was an active and growing cooperation between the Federal Government and the States in drug abuse training. The Manpower and Training Branch had established training centers at regional and State levels, and these had become actively involved in designing training. A training system was in place. By 1974, the MTB also saw the need to review training activities continually and ensure that they were integrated into a national training system, retaining the flexibility needed in each locality, but eliminating costly duplication of effort.

The role of the Federal Government had shifted to offering guidelines and technical assistance, establishing priorities for Federal grants, and providing opportunities for research, evaluation, and development. In effect, it had begun to act as a "think tank" for drug abuse training, with the data and needs assessment coming from States and localities, as well as from professional groups, educational institutions, researchers, and the like. Instead of developing policies and superimposing them on States and localities, the Federal Government was responding to the identification of local and State needs in a proactive way.

The 11 components of the system are:

- the NIDA Manpower and Training Branch,
- the National Drug Abuse Center,
- the Regional Support Centers,
- the State Training Support Programs,
- the Health Professions Education Program,
- the Developmental Training Grants,
- the Research Fellows Training Program,
- the Career Development Center,
- the MTB Task Force on Drug Abuse Manpower,
- the Federal Agency Manpower and Training Group, and
- the MTB Contracts.

All components of NMTS receive input and feedback from each other in the form of services, publications, conferences, graduates, curricula, credentialing plans, degree programs, new data on service provision, etc. Thus, data from recipients of services, program personnel, professional groups, etc., are fed into the system constantly to help assure that the

system's outputs are relevant to their needs. For example, in the design of training programs, one component--the National Drug Abuse Center--obtains data on training needs not only from the States, but also from the Health Professions Education Program, the Research Fellows Programs, and from service providers who report on new needs identified among program clients.

In addition to the national system, in which results are evaluated in terms of national goals, it is important to understand that each component of the system operates as a system. Results are measured by the components in terms of their own goals. Both systems--the national one and the individual one--are involved in the daily operation of a large-scale program.

The ability of each of the NMTS components to contribute to the definition of objectives and the design of programs gives the NMTS its vitality and enables it to focus, from one perspective, on national goals, and from another, on grassroots needs. Another factor that enriches the NMTS is that information about successes and failures at the operating level of many components is fed into the national system. In effect, the NMTS has achieved a continual movement of information among its components.

#### NMTS ACTIVITIES

##### The Manpower Training Branch

The Branch has worked with experts from treatment programs; educational institutions; research organizations; and regional, State, and local groups to design NMTS. Today, MTB itself functions as a component of the system. The missions of the Branch are to coordinate the response to the national demand for training and to provide technical assistance services to treatment providers at all levels.

MTB strengthens and expands technical assistance, research, and resource development. It supports the States in developing and enriching their own training delivery through establishing information systems, encouraging resource development and evaluation, developing alternative funding sources, and establishing credentialing standards. It also interacts with each of the other system components, providing assistance as needed in implementation, management, and evaluation.

In addition to providing resources and assistance and increasing the capacity of the States to provide high quality services, MTB also operates proactively to provide another service. MTB encourages the development of professional standards for drug program personnel and the documentation of professional development through experience, training, and education.

##### The National Drug Abuse Center

The National Drug Abuse Center for Training and Resource Development is the system component which operates as the hub of NMTS. It interacts with the States and other groups to obtain the information needed to carry out

its primary mission--to work from a national level to bring about technology transfer. Technology is transferred via training program designs and related resources, not only from the national level to the local level, but also from local programs to other programs and States. For example, a program developed to train personnel in a western city's drug abuse program to meet the specific needs of Chicano clients may be modified by NDAC, in cooperation with the program's staff, for distribution to other States with large Hispanic populations. These States, in turn, present the training or disseminate the curriculum to local programs.

The Center sponsors ten resident fellows each year. College level student residents work at the Center for 90 days on academic projects related to drug abuse training.

The activities of NDAC are carried out from its offices in Gaithersburg, Maryland. The Center also maintains a National Drug Abuse Materials Distribution Facility in Illinois. NDAC also publishes Training the Human Resources, a periodic publication devoted to current issues related to drug abuse treatment, rehabilitation, and prevention. Copies of this publication can be obtained by writing to Resources, NDAC, 656 Quince Orchard Road, Gaithersburg, Maryland 20760. Materials developed by the Center are available from NDAC's National Drug Abuse Materials Distribution Facility, 2829 Higgins Road, Elk Grove Village, Illinois 60007.

#### The Regional Support Centers

The NDAC also interacts on a continuing basis with the five Regional Support Centers (RSC's), located across the country. The mission of the Centers is to extend and complement the role of NDAC by conducting direct training activities for State and local program personnel, as well as to maintain a nationwide exchange of information of the latest findings and proven intervention techniques.

The Centers help the States carry out training responsibilities, provide training consultation, train trainers, provide technical assistance to the States, and facilitate information and personnel exchanges among regions. RSC's serve as the primary link between NDAC and the States. For further information about the Centers, write or call:

Clifton Mitchell, Training and Education Specialist  
Manpower and Training Branch  
Division of Resource Development  
National Institute on Drug Abuse  
5600 Fishers Lane, Room 10A46  
Rockville, Maryland 20857  
(301) 443-6720

Readers may also contact one of the following Regional Support Centers:

Mr. Charles Williams, Director  
Northeast Regional Support Center  
Yale University Department  
of Psychiatry  
1211 Chapel Street  
New Haven, Connecticut 06511  
(203) 436-0010

Dr. Roy Davis, Director  
Southwest Regional Support Center  
Health Control Systems, Inc.  
10920 Ambassador Drive, Suite 505  
Kansas City, Missouri 64153  
(816) 891-2480

Dr. William Wheeler, Director  
Southeast Regional Support Center  
A.L. Nellum and Associates  
151 Ellis Street, N. E., Suite 429  
Atlanta, Georgia 30308  
(404) 659-8100

Mr. George Swartz, Director  
Western Regional Support Center  
Merriman and Associates  
1088 South 1100 East  
Salt Lake City, Utah 84105  
(801) 363-5052

Ms. Barbara Bedford, Director  
Central Regional Support Center  
Health Control Systems, Inc.  
2720 Des Plaines Avenue, Suite 9  
Des Plaines, Illinois 60018  
(312) 298-7444

#### The State Training Support Program

STSP's are the system component through which NIDA provides direct financial support to States to develop their own manpower training capabilities. The core of STSP services involves upgrading the quality of care provided by helping nondegreed workers develop skills and helping professionals redefine their methods of practice. The STSP's, along with NDAC and RSC's, provide training in treatment delivery; they also cooperate with NIDA's Prevention Branch in providing prevention training to groups such as State education agencies. STSP's help States develop training systems, provide funds for a resource library, maintain an information exchange system, help develop methodologies for credentialing and certification, and promote competency-based advanced standing in degree programs in collaboration with the Career Development Center.

They implement their mission to assist States by carrying out needs assessments, skill development activities, peer review, and peer support mechanisms. The STSP's also provide assistance, as needed, to each Single State Agency (SSA). Each SSA staff has a State Training Program Coordinator who is responsible for the program.

MTB and the other system components frequently consult with STSP's to seek information about training and manpower needs and about the effectiveness of training curricula that have been developed by NDAC. Efforts are continually made by the STSP's to see that local program personnel benefit from the training available from NDAC and that feedback on existing or needed training programs is provided to NDAC. In addition, training in local communities is also provided directly by the STSP's.



Further information on the program is available from the project officer:

Mr. George H. Ziener, Education Administrator  
Manpower and Training Branch  
Division of Resource Development  
National Institute on Drug Abuse  
5600 Fishers Lane, Room 10A46  
Rockville, Maryland 20857  
(301) 443-6720

#### The Career Development Center

Like the NDAC, RSC's, and STSP's, the Career Development Center (CDC) also can be viewed as one of the system's dissemination components. CDC functions to raise the standards of drug treatment by providing non-traditional educational opportunities to drug treatment staff. The Center has worked with more than 30 colleges and universities to introduce skill development curriculums into their course offerings. The Center is also working with the American Council on Education to develop a consortium of colleges that can provide accredited, external-degree programs, and is developing guidelines for this consortium. Other products of the CDC include Drug Program Review, a magazine on issues in drug abuse intervention training and credentialing, Professional Development Assistance Booklets, as well as a Training Information Exchange.

#### The Health Professions Education Program

This component of the NMTS is comprised of eight subcomponents--the Career Teacher Program and seven task forces on nursing, pharmacy, psychology, dentistry, medicine/osteopathy, physician assistants, and nurse practitioners.

The Career Teacher Program, in a collaborative effort with the National Institute on Alcohol Abuse and Alcoholism, cosponsors a program to support a faculty member of selected medical schools to specialize in the study of drug and alcohol abuse and to develop alcohol and drug abuse curricula and materials for use in medical student education. The Program has worked with the National Board of Medical Examiners, bringing a non-public organization into an interface with the NMTS, to introduce drug abuse questions into the M.D. National Board Examinations and into Specialty Board Examinations. The Program is assisting the National Board of Medical Examiners in the development of a Comprehensive Qualifying Examination to test applicants prior to their residencies on their knowledge of drug treatment procedures. The Program is also conducting a survey of medical, dental, and nursing school curricula to determine substance abuse content.

As a regular service to the Program, the Downstate Medical Center (Brooklyn, New York) and the Baylor College of Medicine (Houston, Texas) regularly review literature and audiovisual products, assessing their pertinence to use in medical schools. In addition, these medical schools also develop audiovisual materials for use by the Program.

The seven task forces work to provide information to the system and to the body of professionals that each represents. They also recommend and outline procedures for getting information to the system and to the professions on the subjects of drug abuse treatment and prevention.

The Health Professions Education Program has other activities. These are funded as contracts. For example, a Medical Monograph Series for use by primary care and drug treatment staff is being prepared in conjunction with NDAC. In addition, a course has been developed for people engaged in providing emergency medical treatment to drug abusing patients. A special study is also underway to assess the current and potential use of nurse practitioners in drug abuse treatment and rehabilitation. Further information on the Health Professions Education Program is available by contacting:

James F. Callahan, Deputy Chief  
Manpower and Training Branch  
Division of Resource Development  
National Institute on Drug Abuse  
5600 Fishers Lane, Room 10A46  
Rockville, Maryland 20857  
(301) 443-4922

#### The Developmental Training Grants Program

One mission of the Developmental Training Grants Program is to enhance the excellence of drug treatment, rehabilitation, and health care through programs of accredited and credentialed training to professional and paraprofessional treatment personnel. Another is to develop models of inservice and interagency training to foster a climate of concern for quality patient care and a desire to cooperate with other community agencies serving the drug-dependent client. The third is to upgrade skills and career mobility and develop model external-degree, competency-based programs.

Training programs in narcotics addiction and drug abuse are supported in five fields. These are: 1) a program for professionals designed to prepare people in health or health-related professions to work in the narcotics addiction and drug abuse field; 2) continuing education for professionals whose principal work is with drug-dependent clients; 3) interagency and interdisciplinary training which brings together personnel of drug treatment programs, the criminal justice system, and community colleges or universities; 4) inservice training for treatment program staff; and 5) external-degree, competency-based training for paraprofessionals, and development by community colleges of curriculums for use by Single State Agencies.

Further information on the Program is available by contacting:

Edward T. Morgan, Jr., Training and Education Advisor or  
Avraham Forman, Training and Education Advisor  
Manpower and Training Branch  
Division of Resource Development  
National Institute on Drug Abuse  
5600 Fishers Lane, Room 10A46  
Rockville, Maryland 20857  
(301) 443-4922

#### The Research Fellows Training Program

This program is designed to provide grants to individuals at the undergraduate, graduate, and postdoctoral level who are engaged in research in the drug abuse field. A principal goal of the component is to develop a means of enabling fellows to interact with each other and with other components of the NMTS. The results of their research are shared with other components and introduced into training.

Further information on the Program is available by contacting:

Edward T. Morgan, Jr., Training and Education Advisor  
Manpower and Training Branch  
Division of Resource Development  
National Institute on Drug Abuse  
5600 Fishers Lane, Room 10A46  
Rockville, Maryland 20857  
(301) 443-4922

#### The MTB Task Force on Drug Abuse Manpower

Representatives of NMTS components, grantees, and contractors function with NIDA staff on this Task Force as an ongoing "think tank" with the mission of providing input to MTB on a wide range of manpower and training issues. For example, the group provided input to the manpower strategy for 1978-79. The first strategy was developed by NIDA for Fiscal Year 1977; its purpose was to communicate the state-of-the-art of drug abuse intervention and set forth systematic directions for the year, including implementation plans. For the new strategy, Task Force members worked with NIDA staff to produce a working document that specifies the programs and components of the system and the activities each should carry out to achieve manpower and training goals and objectives.

#### The Federal Agency Manpower and Training Group

Linkages between NIDA's NMTS and other training systems in Federal agencies are maintained through participation in the Federal Agency Manpower and Training Group (FAMTG). This is a collaborative effort conducted by the training divisions of several agencies. Through information exchange, innovative ideas developed in one agency can be incorporated into others. Working together, the Group's members can arrive at new approaches to implementing Federal training policy.

## Contracted Services

Contracts are also awarded for specific purposes by the system. One of these is the Single State Agency Minority Internship Program, which derived from NIDA's research findings that ethnic and racial minorities are almost a majority among the Nation's drug-abusing program population, but are disproportionately represented among administrative and managerial positions in SSA's. The Program's mission is to conduct research, experiments, and demonstrations to assist State agencies in adjusting this imbalance.

Another contract has been awarded to a group of Puerto Rican drug abuse professionals to relate the products of NMTS to the particular needs of Puerto Rican workers in the field.

A contract with the Medical College of Pennsylvania was established to identify the functions carried out by drug abuse workers and the skills, knowledge, and attitudes needed to provide services most effectively. This was an outgrowth of an earlier research project conducted to identify patterns for credentialing workers in the newly recognized field of drug abuse intervention.

## FUTURE DIRECTIONS FOR NMTS

As the NMTS sharpens its focus on analyzing of manpower trends and finding ways to best allocate and train new sources of manpower in the years ahead, new components will be added to the system. A large-scale program, such as the NMTS, is not built mechanically, with each piece "plugged in" when it is ready. Rather, all pieces exist in some fashion, regardless of their stage of development. The NMTS recognizes that programs and opportunities developed for the allied health fields or to alleviate social problems can be compatible with, and incorporated into, the system. The overall effort will grow and expand.

Thus, a major focus of the NMTS in the months and years ahead will be to facilitate the development and maintenance of manpower-related components to bring them into interaction with existing training components. The development of new linkages or interfaces among system components and the strengthening of existing ones will be facilitated by NMTS leaders; each system component will take part in identifying and establishing linkages.

Information will be provided to system components to enable them to understand the system and the roles of each component. While the NMTS can already be characterized as a well-defined system, it is still in an evolutionary process and probably always will be, as National goals and grass-roots needs change over time.



## Developmental Training Grants

### CALIFORNIA

#### Neurochemical Aspects of Drug Tolerance and Dependence

University of California (415) 666-1951  
Department of Pharmacology  
3rd and Parnassus  
San Francisco, California 94112

Program Director: E. Leong Way, Ph.D.  
5 T01 DA/DA-00006-05X0

#### Training for Substance Abuse Treatment Workers

West Contra Costa Community (415) 233-3994  
Health Care Corporation  
101 Broadway  
Richmond, California 94804

Program Director: Jacquelyne Kinsler-Miller  
5 T41 DA/DA-07016-04X0

#### Loyola Law School Practicum in Drug Rehabilitation

Loyola University (213) 642-2913  
School of Law  
1440 North Ninth Street  
Los Angeles, California 90015

Program Director: Thomas J. Scully  
5 T01 DA/DA-07032-03X0

### COLORADO

#### Masters Degree in Substance Abuse

Metropolitan State College (303) 629-2511  
Drug/Alcohol Institute  
1006 11th Street  
Denver, Colorado 80204

Program Director: John E. Donohue, Ed.D.  
1 T01 DA/AA-07121-01X0

### DISTRICT OF COLUMBIA

#### National Drug Abuse Career Development Center

Center for Human Services (301) 654-2550  
5530 Wisconsin Avenue, N. W.  
Suite 1600  
Washington, D. C. 20015

Program Director: Avis Pointer, Ph.D.  
5 T41 DA/DA-00308-05X0

### FLORIDA

#### Associate Degree Program in Human Services/Drug Abuse

Miami-Dade Community College (305) 596-1330  
11011 S.W. 104th Street  
Miami, Florida 33176

Program Director: James E. O'Connor  
1 T41 DA/DA-07122-01X0

### ILLINOIS

#### In-Service Training For Drug Abuse Counselors

Allied Health & Rehabili- (312) 265-7781  
tation Corporation  
Bethany Drug Awareness Program  
341 South St. Louis Avenue  
Chicago, Illinois 60624

Program Director: Thomas C. Eversley  
2 T15 DA/DA-00220-04X0

### MASSACHUSETTS

#### Substance Abuse Problems - Medical Student and Physician Training

Harvard University Medical (617) 855-2716  
School  
McLean Hospital  
115 Mill Street  
Belmont, Massachusetts 02178

Program Director: Jack H. Mendelson, M.D.  
1 T01 DA/AA-07046-01A1

## MICHIGAN

### Detroit Institute of Addiction Research and Training (DIART)

Detroit Institute of Addic- (313) 834-7672  
tion Research and Training  
7707 West Chicago  
Detroit, Michigan 48204

Program Director: Thomas G. Kaufmann  
5 T41 DA/DA-07075-02X0

### Substance Abuse Integration into PA Training Program

Western Michigan University (616) 383-1636  
College of Health and Human  
Services  
Kalamazoo, Michigan 49008

Program Director: Norman P. Johnson, Ph.D.  
1 T41 DA/DA-07140-01X0

## MINNESOTA

### External Degree Program for Drug Abuse Personnel

University of Minnesota (612) 373-8175  
School of Public Health  
Box 76 Powell Hall  
Minneapolis, Minnesota 55455

Program Director: Dennis A. Armstrong  
5 T02 DA/DA-07082-02X0

## NEW JERSEY

### Drug Abuse Personnel Education and Training System

State of New Jersey (609) 452-2355  
Training and Education Center  
U.S. Route #1 & Emmons Drive  
Princeton, New Jersey 80540

Program Director: William Cseh  
5 T41 DA/DA-07069-02X0

## NEW YORK

### Clinical Training for Law Students and Young Lawyers

Legal Action Center of the (212) 679-6502  
City of New York, Inc.  
271 Madison Avenue  
New York, New York 10016

Program Director: Deborah M. Greenburg  
1 T21 DA/MH-07111-01X0

### Bilingual Degree Program for Hispanic Drug Abuse Workers

Boricua College (212) 663-6467  
2875 Broadway  
New York, New York 10025

Program Director: Victor G. Alicea, Ph.D.  
1 T41 DA/DA-07125-01X0

## PENNSYLVANIA

### Competency-Based Masters Program in Human Services

Eagleville Hospital and (215) 539-6000  
Rehabilitation Center  
P.O. Box 45  
Eagleville, Pennsylvania 19408

Program Director: Joseph Ershun  
1 T01 DA/DA-07052-01X0

## SOUTH CAROLINA

### Institute of Experimental Training

South Carolina Commission (803) 758-3866  
on Alcohol and Drug Abuse  
P.O. Box 4616  
Columbia, South Carolina 29204

Program Director: Gene Sausser, Ph.D.  
5 T01 DA/DA-07038-03X0

Drug Abuse Training for Medical  
Professionals

Medical University of South Carolina (803) 792-2081  
Department of Psychiatry and  
Behavioral Sciences  
80 Barre Street  
Charleston, South Carolina 29401

Program Director: Patricia B. Sutker, Ph.D.  
5 T01 DA/DA-07070-02X0

**TEXAS**

Drug Abuse Education Project

Our Lady of the Lake College (512) 434-6711  
Worden School of Social Service  
411 S.W. 24th Street  
San Antonio, Texas 78285

Program Director: John R. Moore  
5 T01 DA/DA-00055-05X0

CADAP Counselor and Management Training  
Program

SouthWest Training Institute (915) 532-7976  
1615 Arizona  
El Paso, Texas 79902

Program Director: Arturo E. Franco  
1 T15 DA/DA-07139-01X0

Substance Abuse Training For Human Service  
Providers

SouthWest Training Institute (915) 532-7976  
1615 Arizona  
El Paso, Texas 79902

Program Director: Ramon Adame  
1 T15 DA/DA-07142-01X0

The Patrician Movement Career Opportunity  
Program

The Patrician Movement (512) 532-3126  
222 E. Mitchell Street  
San Antonio, Texas 78210

Program Director: Rev. Dermot N. Brosnan  
1 T01 DA/DA-07150-01X0

**PUERTO RICO**

Drug Abuse Psychology Training Program

University of Puerto Rico (809) 764-0000  
College of Social Sciences  
Department of Psychology  
Rio Piedras, Puerto Rico 00931

Program Director: Jose J. Bauermeister, Ph.D.  
1 T01 DA/DA-07078-01X0

Emergency Detox and Admission Unit  
Training Program

Training Institute (809) 763-7575  
Department of Addiction Services  
Box B-Y Rio Piedras Station  
Rio Piedras, Puerto Rico 00928

Program Director: Nilda M. Molinary  
1 T15 DA/DA-07094-01X0

## Career Teacher Training Grants

### CALIFORNIA

University of California (213) 825-0085  
Neuropsychiatric Institute  
760 Westwood Plaza  
Los Angeles, California 90024

Career Teacher: Alan Brovar, M.D.  
Sponsor: Louis J. West, M.D.  
5 T01 DA/AA-07106-02X0

Charles R. Drew Postgraduate (213) 603-3001  
Medical School  
Department of Human Behavior  
and Psychiatry  
1621 East 120th Street  
Los Angeles, California 90059

Career Teacher: Jocelyn T. Whiten, Ph.D.  
Sponsor: David Satcher, M.D.  
1 T01 DA/AA-07168-01X0

### COLORADO

University of Colorado (303) 394-5248  
Medical Center  
Department of Psychiatry  
4200 East Ninth Avenue  
Denver, Colorado 80220

Career Teacher: Thomas J. Crowley, M.D.  
Sponsor: Douglas B. Carter, M.D.  
5 T01 DA/AA-07076-02X0

### FLORIDA

University of Miami (305) 325-6862  
School of Medicine  
P.O. Box 520875 - Biscayne Annex  
Miami, Florida 33152

Career Teacher: Brian Weiss, M.D.  
Sponsor: Burton J. Goldstein, M.D.  
1 T01 DA/AA-07116-01X0

### ILLINOIS

University of Illinois (312) 996-7630  
Medical Center  
School of Public Health  
P.O. Box 6998  
Chicago, Illinois 60680

Career Teacher: Joseph Levin, Ed.D.  
Sponsor: Edward A. Lichter, M.D.  
5 T01 DA/AA-01815-02X0

### IOWA

University of Iowa (319) 353-3719  
College of Medicine  
Department of Psychiatry  
Iowa City, Iowa 52242

Career Teacher: Lucas S. VanOrden, M.D.  
Sponsor: George Winokur, M.D.  
1 T01 DA/AA-07092-01X0

### LOUISIANA

Louisiana State University (318) 226-3092  
Medical School  
Department of Psychiatry  
P.O. Box 33932  
Shreveport, Louisiana 71130

Career Teacher: Donald Cherek, Ph.D.  
Sponsor: John T. Brauchi, M.D.  
1 T01 DA/AA-07130-01X0

Tulane University (504) 588-5246  
Department of Psychiatry and  
Neurology  
1430 Tulane Avenue  
New Orleans, Louisiana 70112

Career Teacher: Donald M. Gallant, M.D.  
Sponsor: Robert G. Heath, M.D.  
1 T01 DA/AA-07161-01X0



## MARYLAND

University of Maryland (301) 528-6800  
School of Medicine  
Alcohol and Drug Abuse Program  
Baltimore, Maryland 21201

Career Teacher: Charles L. Whitfield, M.D.  
Sponsor: Leon Wurmser, M.D.  
5 T01 DA/AA-07096-02X0

University of Maryland (301) 528-7462  
School of Dentistry  
660 W. Redwood Street  
Baltimore, Maryland 21201

Career Teacher: Mark L. Curl, D.D.S.  
Sponsor: Errol L. Reese, D.D.S.  
1 T01 DA/AA-07118-01A1

## MASSACHUSETTS

University of Massachusetts (617) 856-3021  
Medical Center  
Department of Family & Community  
Medicine  
Worcester, Massachusetts 01605

Career Teacher: James J. Lukes, Ph.D.  
Sponsor: Robin J.O. Catlin  
1 T01 DA/AA-07159-01X0

## OHIO

University of Cincinnati (513) 872-5601  
College of Medicine  
231 Bethesda Avenue  
Cincinnati, Ohio\* 45267

Career Teacher: E. Don Nelson, Pharm.D.  
Sponsor: Robert S. Daniels, M.D.  
5 T01 DA/AA-01812-02X0

## SOUTH DAKOTA

University of South Dakota (605) 339-6785  
School of Medicine  
Department of Psychiatry  
2501 West 22nd Street  
VA Tower  
Sioux Falls, South Dakota 57105

Career Teacher: Douglas Soule, Ph.D.  
Sponsor: William C. Fuller, M.D.  
1 T01 DA/AA-07166-01X0

CAREER TEACHER TRAINING CENTER GRANTS

**NEW YORK**

State University of New York  
Downstate Medical Center  
450 Clarkson Avenue  
Brooklyn, New York 11203  
2 T01 DA/AA-00083-05X0

Program Director:  
Benjamin Kissin, M.D. (212) 270-3131

Program Coordinator:  
Joel Solomon, M.D. (212) 270-2569

Program Administrator:  
Charles Buchwald, Ph.D. (212) 462-2231

**TEXAS**

Baylor College of Medicine  
Texas Medical Center  
Department of Psychiatry  
1300 Moursund  
Houston, Texas 77031  
5 T01 DA/DA-00061-06X0

Program Director:  
Joseph Schoolar, Ph.D., M.D. (713) 797-1601

Program Co-Director:  
Alex Pokorny, M.D. (713) 790-4865

## Individual Research Fellowship Training Grants

### CALIFORNIA

#### Psychological and Physiological Effects of Naltrexone

University of California (213) 794-6286  
and VA Brentwood Hospital  
Wilshire & Sawtelle Blvds.  
Los Angeles, California 90073

Fellow: Stephen I. Sideroff, Ph.D.  
Sponsor: Murray E. Jarvik, M.D.  
4 F32 DA/DA-05050-03X0

#### Perceptual Alterations During Marijuana Intoxication

Stanford University (415) 661-8080  
School of Medicine X 452  
Department of Psychiatry  
Stanford, California 94305

Fellow: Hugh L. Baras, Ph.D.  
Sponsor: Reese T. Jones, M.D.  
7 F32 DA/DA-05051-02X0

#### Experiential Determinants of Reactions to Morphine

University of California (213) 825-2388  
Department of Psychology  
Los Angeles, California 90024

Fellow: Jack E. Sherman  
Sponsor: John C. Liebskind, Ph.D.  
1 F32 DA/DA-05097-01X0

#### Training Program in Clinical Neuroendocrinology

University of California (213) 825-2410  
Neuropsychiatric Institute  
Department of Psychiatry  
760 Westwood Plaza  
Los Angeles, California 90024

Fellow: Jeffery N. Wilkins, M.D.  
Sponsor: Murray E. Jarvik, M.D.  
1 F32 DA/DA-05107-01X0

#### Conformational Studies of B-Meperidines

Stanford University (415) 497-6039  
Medical Center

Department of Genetics  
Stanford, California 94305

Fellow: Stanley K. Burt, Ph.D.  
Sponsor: Gilda H. Loew, Ph.D.  
1 F32 DA/DA-05130-01X0

#### Studies of the Role of Endorphins in the Basal Ganglia

Salk Institute for Biologi- (714) 453-3400  
cal Studies X 294  
Peptide Biology Laboratory  
P.O. Box 1809  
San Diego, California 92112

Fellow: Donald R. Britton, Ph.D.  
Sponsor: Wylie W. Vale, Ph.D.  
1 F32 DA/DA-05131-01X0

#### Opiate Addiction: Effects on Neuro- chemical Development

University of California (805) 961-2028  
Department of Psychology  
Santa Barbara, California 93106

Fellow: Charles A. Altar  
Sponsor: Loy D. Lytle, Ph.D.  
1 F31 DA/DA-05136-01X0

### DISTRICT OF COLUMBIA

#### Effects of Abused Drugs on Complex Behavioral Chains

Georgetown University (202) 625-7543  
Department of Pharmacology  
Washington, D. C. 20007

Fellow: Joseph Moerschbaecher, Ph.D.  
Sponsor: Donald M. Thompson, Ph.D.  
2 F32 DA/DA-05014-02X0

### ILLINOIS

#### CNS Sites Mediating Opiate Reinforcement

University of Chicago (312) 947-6451  
School of Biological Sciences  
Department of Pharmacology and  
Physiological Sciences  
Chicago, Illinois 60637

Fellow: Anthony K. Killian  
Sponsor: Charles R. Schuster, Ph.D.  
5 F31 DA/DA-05102-02X0

Autoradiographic Cellular Localization  
of Opioid Drugs

University of Chicago (312) 947-6510  
The Pritzker School of Medicine  
Department of Pediatrics  
Chicago, Illinois 60637

Fellow: Juan R. Sanchez-Ramos, Ph.D.  
Sponsor: Bruce H. Wainer, M.D.  
1 F32 DA/DA05134-01X0

**MARYLAND**

The Interconverting Opiate Receptor:  
Energetic Analysis

National Institute of Mental (301) 496-9167  
Health  
Adult Psychiatry Branch  
9000 Rockville Pike  
Bethesda, Maryland 20014

Fellow: Duncan P. Taylor  
Sponsor: Candace B. Pert, Ph.D.  
1 F32 DA/DA-05101-01X0

Biochemical Studies of the Opiate Receptor

National Institute of Mental (301) 496-9167  
Health  
Section on Biochemistry  
9000 Rockville Pike  
Bethesda, Maryland 20014

Fellow: Terry W. Moody, Ph.D.  
Sponsor: Candace B. Pert, Ph.D.  
1 F32 DA/DA-05124-01X0

**MASSACHUSETTS**

Sex Differences in Responsiveness to Cocaine

Tufts University (617) 956-6863  
School of Medicine  
Department of Biochemistry & Pharmacology  
Boston, Massachusetts 02186

Fellow: Michael L. Thompson, Ph.D.  
Sponsor: Louis Shuster, Ph.D.  
2 F32 DA/DA-05054-02X0

Opiate Narcotic Analgesics: Nutritional  
Aspects

Massachusetts Institute of (617) 253-7558  
Technology  
School of Science  
Cambridge, Massachusetts 02139

Fellow: Lee Allen Phebus  
Sponsor: Loy D. Lytle, Ph.D.  
4 F31 DA/DA-05071-03X0

Narcotic Dependence and Brain Acetylcholine

MIT - School of Science (617) 253-6731  
Department of Nutrition &  
Food Science  
77 Massachusetts Avenue  
Cambridge, Massachusetts 02139

Fellow: Lawrence J. Botticelli  
Sponsor: Richard J. Wurtman, M.D.  
5 F31 DA/DA-05089-02X0

Endorphins, Serotonin and Opiate Actions

MIT - School of Science (617) 253-6731  
Department of Nutrition &  
Food Science  
77 Massachusetts Avenue  
Cambridge, Massachusetts 02139

Fellow: John F. Reinhard, Jr.  
Sponsor: Richard J. Wurtman, M.D.  
1 F31 DA/MH-07583-01X0

**MINNESOTA**

A Primate Model of Oral Drug Dependence

University of Minnesota (612) 373-3275  
School of Medicine  
Box 392 Mayo  
Minneapolis, Minnesota 55455

Fellow: Marilyn E. Carroll, Ph.D.  
Sponsor: Richard Meisch, M.D., Ph.D.  
5 F32 DA/DA-05068-02X0

Etonitazene-Reinforced Behavior

University of Minnesota (612) 373-5033  
Department of Psychology  
Minneapolis, Minnesota 55455

Fellow: Patrick M. Beardsley  
Sponsor: Travis I. Thompson, Ph.D.  
5 F31 DA/DA-05111-02X0

## NEW JERSEY

### Dopaminergic-Cholinergic Interactions in the Actions of Morphine

Rutgers University (201) 932-3290  
Department of Pharmacology  
Busch Campus  
New Brunswick, New Jersey 08903

Fellow: Mary Lou Vallano  
Sponsor: Christina VanderWende, Ph.D.  
5 F31 DA/DA-05056-02X0

## NEW YORK

### Animal Models of Drug Induced Movement Disorder

University of Rochester (716) 275-3791  
Department of Radiation Biology  
400 Elmwood Avenue  
Rochester, New York 14642

Fellow: Stephen L. Miksic, Ph.D.  
Sponsor: Bernard Weiss, Ph.D.  
2 F32 DA/DA-05069-03X0

### Early Childhood Cannabis Use in Jamaica

Columbia University (212) 678-3309  
Teachers College  
525 West 120th Street  
New York, New York 10027

Fellow: Melanie C. Dreher, Ph.D.  
Sponsor: Lambros Comitas, Ph.D.  
1 F32 DA/DA-05092-01X0

## OREGON

### Habit Formation: Relationship of Methadone and Learning

University of Oregon (509) 225-8464  
Health Science Center  
Department of Medical Psychology  
3181 S.W. Sam Jackson Park Road  
Portland, Oregon 97201

Fellow: Sheryl G. Beck  
Sponsor: James O'Brien, Ph.D.  
5 F31 DA/DA-05053-02X0

## PENNSYLVANIA

### Morphine-Induced Pupillary Fluctuation

Temple University (215) 221-3242  
School of Medicine  
Department of Pharmacology  
Philadelphia, Pennsylvania 19140

Fellow: Rodney B. Murray  
Sponsor: M. W. Adler, Ph.D. and  
R. J. Tallarida, Ph.D.  
1 F31 DA/MH-05119-01X0

### Conditioned Opponent Processes and Behavior

University of Pennsylvania (215) 243-7632  
Graduate School of Arts & Sciences  
Department of Psychology  
Philadelphia, Pennsylvania 19174

Fellow: Jonathan I. Schull  
Sponsor: Paul Rozin, Ph.D.  
1 F31 DA/DA-05132-01X0

## WASHINGTON

### Cholinergic Influences on Delta-9-THC

University of Washington (206) 543-7147  
School of Medicine  
Department of Pharmacology  
Seattle, Washington 98195

Fellow: Thomas F. Murray  
Sponsor: Akira Horita, Ph.D.  
4 F31 DA/DA-05036-03X0

### Analogue Synthesis

University of Washington (206) 543-1604  
School of Arts & Sciences  
Department of Chemistry  
Seattle, Washington 98105

Fellow: Ronald C. Haaseth  
Sponsor: Boris Weinstein, Ph.D.  
1 F31 DA/DA-05121-01X0

**WISCONSIN**

Morphine-Induced Alterations in Brain  
Protein Turnover

University of Wisconsin (608) 262-1733  
Medical School  
Department of Pharmacology  
Madison, Wisconsin 53706

Fellow: Po Yok Chee, Ph.D.  
Sponsor: June L. Dahl, Ph.D.  
5 F32 DA/DA-05047-03X0

**CANADA**

Neuroanatomical Map of Opiate Reinforce-  
ment Sites

Concordia University 879-5978  
Department of Psychology  
1455 deMaisonneuve Boulevard, West  
Montreal, Quebec, H3G 1 M8 Canada

Fellow: Michael D. Britt  
Sponsor: Roy A. Wise, Ph.D.  
2 F32 DA/DA-05015-02X0



## Institutional Research Training Grants

### CALIFORNIA

#### Training for Addiction Research

Addiction Research Foundation (415) 321-8339  
701 Welch Road, Suite 325  
Palo Alto, California 94304

Program Director: Avram Goldstein, M.D.  
5 T32 DA/DA-07063-03X0

### OKLAHOMA

#### Biobehavioral Approaches to Substance Abuse

University of Oklahoma (405) 271-4488  
Health Sciences Center  
P.O. Box 26901  
Oklahoma City, Oklahoma 73190

Program Director: Ronald S. Krug, Ph.D.  
1 T32 DA/DA-07105-01X0

### COLORADO

#### Drug Abuse: Mechanism, Pharmacogenetics and Behavior

University of Colorado (303) 394-7076  
School of Medicine  
4200 East Ninth Avenue  
Denver, Colorado 80220

Program Director: Richard A. Deitrich, Ph.D.  
5 T32 DA/DA-07043-03X0

### VIRGINIA

#### Training in the Pharmacology of Abused Drugs

Medical College of Virginia (804) 770-4677  
Department of Pharmacology  
12th and Clay Streets, McGuire Hall  
Richmond, Virginia 23298

Program Director: William L. Dewey, Ph.D.  
5 T32 DA/DA-07027-03X0

### ILLINOIS

#### Research Training in Pharmacology of Abused Substances

University of Illinois (312) 996-7635  
Medical Center  
P.O. Box 6998  
Chicago, Illinois 60680

Program Director: Edmund G. Anderson, Ph.D.  
5 T32 DA/AA-07067-02X0

### MINNESOTA

#### Behavioral Approaches to Drug Dependence

University of Minnesota (612) 373-5033  
Psychiatry Research Unit  
Box 393 Mayo  
Minneapolis, Minnesota 55455

Program Director: Travis I. Thompson, Ph.D.  
1 T32 DA/DA-07097-01X0